

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	UT	69107	3/16/00
O.I.P.E. CLASSIFIER		10	3/17
FORMALITY REVIEW		71531	5-2-00
RESPONSE FORMALITY REVIEW		71531	6-9-00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	
Original	
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If more than 150 claims or 10 actions
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